..0U.S. Department of Housing and Urban Development Office of Public and Indian Housing

# PHA Plans

5-Year Plan for Fiscal Years 2007 - 2011 Annual Plan for fiscal year 2007

TX 226-VO2

## PHA Plan Agency Identification

**PHA Name:** Timpson Housing Authority PHA Number: TX226 PHA Fiscal Year Beginning: 04/2007 **Public Access to Information** Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) X Main administrative office of the PHA PHA development management offices PHA local offices **Display Locations For PHA Plans and Supporting Documents** The PHA Plans (including attachments) are available for public inspection at: (select all that apply) Main administrative office of the PHA X PHA development management offices PHA local offices Main administrative office of the local government Main administrative office of the County government Main administrative office of the State government Public library PHA website Other (list below) PHA Plan Supporting Documents are available for inspection at: (select all that apply) Main business office of the PHA PHA development management offices Other (list below)

# 5-YEAR PLAN PHA FISCAL YEARS 2006- 2011

[24 CFR Part 903.5]

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	es in the PHA's jurisdiction. (select one of the choices below)
X	The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.
	The PHA's mission is: (state mission here)
	Goals oals and objectives listed below are derived from HUD's strategic Goals and Objectives and those
empha identii PHAS SUCC (Quan	asized in recent legislation. PHAs may select any of these goals and objectives as their own, or fy other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, as ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF CESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS. It is the measures would include targets such as: numbers of families served or PHAS scores (red.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.
HUI hous	Strategic Goal: Increase the availability of decent, safe, and affordable ing.
X	PHA Goal: Expand the supply of assisted housing Objectives:
	Apply for additional rental vouchers:
	X Reduce public housing vacancies:
	Leverage private or other public funds to create additional housing
	opportunities:  Acquire or build units or developments
	Other (list below)
X	PHA Goal: Improve the quality of assisted housing Objectives:
	X Improve public housing management: (PHAS score)
	Improve voucher management: (SEMAP score)
	X Increase customer satisfaction:
	X Concentrate on efforts to improve specific management functions:
	(list; e.g., public housing finance; voucher unit inspections)
	Renovate or modernize public housing units:  Demolish or dispose of obsolete public housing:
	Demonsh of dispose of obsolete public housing.

		Provide replacement public housing:
		Provide replacement vouchers:
		Other: (list below)
	PHA O Object	Goal: Increase assisted housing choices ives:  Provide voucher mobility counseling: Conduct outreach efforts to potential voucher landlords Increase voucher payment standards Implement voucher homeownership program: Implement public housing or other homeownership programs: Implement public housing site-based waiting lists: Convert public housing to vouchers: Other: (list below)
HUD	Strateg	ic Goal: Improve community quality of life and economic vitality
X	PHA C	Goal: Provide an improved living environment
	Object	
		Implement measures to deconcentrate poverty by bringing higher income
		public housing households into lower income developments: Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income
		developments:
		Implement public housing security improvements:
	Ħ	Designate developments or buildings for particular resident groups
		(elderly, persons with disabilities)
		Other: (list below)
	ш	
HUD :	Strateg	ic Goal: Promote self-sufficiency and asset development of families
	dividua	
X		Goal: Promote self-sufficiency and asset development of assisted
housel		
	Object	
		Increase the number and percentage of employed persons in assisted
		families:
		Provide or attract supportive services to improve assistance recipients'
		employability:
		Provide or attract supportive services to increase independence for the
		elderly or families with disabilities.
	Ш	Other: (list below)

# **HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans**

X	PHA (	Goal: Ensure equal opportunity and affirmatively further fair housing
	Object	tives:
	X	Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion national origin, sex, familial status, and disability:
	X	Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion national origin, sex, familial status, and disability:
		Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required:
		Other: (list below)

Other PHA Goals and Objectives: (list below)

# Annual PHA Plan PHA Fiscal Year 2007

[24 CFR Part 903.7]

<u>i.</u>	Annual Plan Type:	
Sel	lect which type of Annual Plan the PHA will submit.	
X	Standard Plan	
St	reamlined Plan:  High Performing PHA Small Agency (<250 Public Housing Units) Administering Section 8 Only	
X	Troubled Agency Plan	
[24 Pro	Executive Summary of the Annual PHA Plan  CFR Part 903.7 9 (r)]  ovide a brief overview of the information in the Annual Plan, including highlights of major in discretionary policies the PHA has included in the Annual Plan.	itiatives
[24 Pro	Annual Plan Table of Contents  4 CFR Part 903.7 9 (r)]  ovide a table of contents for the Annual Plan, including attachments, and a list of supporting cuments available for public inspection.  Table of Contents	
		Page #
Aı i.	nnual Plan Executive Summary	
ii.		
	1. Housing Needs	
	2. Financial Resources	
	3. Policies on Eligibility, Selection and Admissions	
	4. Rent Determination Policies	
	5. Operations and Management Policies	
	<ul><li>6. Grievance Procedures</li><li>7. Capital Improvement Needs</li></ul>	
	8. Demolition and Disposition	
	9. Designation of Housing	
	10. Conversions of Public Housing	
	11. Homeownership	
	12. Community Service Programs	
	13. Crime and Safety	

- 14. Pets (Inactive for January 1 PHAs)
- 15. Civil Rights Certifications (included with PHA Plan Certifications)
- 16. Audit
- 17. Asset Management
- 18. Other Information

#### **Attachments**

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

X F X N	Admissions Policy for Deconcentration FY 2005 Capital Fund Program Annual Statement Most recent board-approved operating budget (Required Attachment for PHAs hat are troubled or at risk of being designated troubled ONLY)
F F X O in	onal Attachments: PHA Management Organizational Chart FY 2005 Capital Fund Program 5 Year Action Plan Public Housing Drug Elimination Program (PHDEP) Plan Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text) Other (List below, providing each attachment name)
(	Community Service, Pet Deposit, Statement of Progress Meeting 5-Year Plan and Goals.

#### **Supporting Documents Available for Review**

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review					
Applicable &	Supporting Document	Applicable Plan Component			
On Display		777			
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans			
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans			
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			
	Consolidated Plan for the jurisdiction/s in which the PHA is	Annual Plan:			

Applicable	List of Supporting Documents Available for Supporting Document	Applicable Plan	
& On Display		Component	
On Display	located (which includes the Analysis of Impediments to Fair Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	Housing Needs	
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;	
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies	
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies	
	Public Housing Deconcentration and Income Mixing Documentation:  1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 Quality Housing and Work Responsibility Act Initial Guidance; Notice and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies	
XX	Public housing rent determination policies, including the methodology for setting public housing flat rents  check here if included in the public housing A & O Policy	Annual Plan: Rent Determination	
XX	Schedule of flat rents offered at each public housing development  check here if included in the public housing A & O Policy	Annual Plan: Rent Determination	
	Section 8 rent determination (payment standard) policies  check here if included in Section 8  Administrative Plan	Annual Plan: Rent Determination	
XX	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance	
XX	Public housing grievance procedures  X check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures	
	Section 8 informal review and hearing procedures  check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures	
	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs	
XX	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs	

	List of Supporting Documents Available for Review					
Applicable & On Display	Supporting Document	Applicable Plan Component				
XX	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs				
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs				
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition				
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing				
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing				
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership				
	Policies governing any Section 8 Homeownership program  check here if included in the Section 8  Administrative Plan	Annual Plan: Homeownership				
XX	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency				
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency				
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency				
	The most recent Public Housing Drug Elimination Program (PHEDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention				
XX  The most recent fiscal year audit of the PHA condunder section 5(h)(2) of the U.S. Housing Act of 1 S.C. 1437c(h)), the results of that audit and the PH response to any findings		Annual Plan: Annual Audit				
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs				
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)				

# 1. Statement of Housing Needs [24 CFR Part 903.7 9 (a)]

#### A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction							
by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	20	4	4	N/A	N/A	N/A	N/A
Income >30% but <=50% of AMI	13	4	4	N/A	N/A	N/A	N/A
Income >50% but <80% of AMI	24	4	4	N/A	N/A	N/A	N/A
Elderly	15	4	4	N/A	N/A	N/A	N/A
Families with Disabilities	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	23	4	4	N/A	N/A	N/A	N/A
Race/Ethnicity	4	4	4	N/A	N/A	N/A	N/A
Race/Ethnicity	1	4	4	N/A	N/A	N/A	N/A
Race/Ethnicity	33	4	4	N/A	N/A	N/A	NA

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

	Consolidated Plan of the Jurisdiction/s
	Indicate year:
	U.S. Census data: the Comprehensive Housing Affordability Strategy
	("CHAS") dataset
	American Housing Survey data
	Indicate year:
	Other housing market study
	Indicate year:
X	Other sources: (list and indicate year of information)

#### U.S. Census Data 1990

## B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List						
Waiting list type: (select one)  Section 8 tenant-based assistance  X Public Housing  Combined Section 8 and Public Housing  Public Housing Site-Based or sub-jurisdictional waiting list (optional)  If used, identify which development/subjurisdiction:						
	# of families	% of total families	Annual Turnover			
Waiting list total	21		6			
Extremely low income <=30% AMI	1	.021				
Very low income (>30% but <=50% AMI)	10	.210				
Low income (>50% but <80% AMI)	10	.210				
Families with children	9	.189				
Elderly families	6	.126				
Families with Disabilities	1	.021				
Race/ethnicity	5	.105				
Race/ethnicity						
Race/ethnicity						
Race/ethnicity						
Characteristics by Bedroom Size (Public Housing Only)						
1BR	24		3			
2 BR	16		2			
3 BR	4		1			
4 BR						
5 BR						
5+ BR						

	Housing Needs of Families on the Waiting List
	waiting list closed (select one X No  Yes
If yes:	
	How long has it been closed (# of months)?
	Does the PHA expect to reopen the list in the PHA Plan year? No Yes
	Does the PHA permit specific categories of families onto the waiting list, even if generally closed? No Yes
	generally closed: ivo i es
	rategy for Addressing Needs
	e a brief description of the PHA's strategy for addressing the housing needs of families in the ction and on the waiting list <b>IN THE UPCOMING YEAR</b> , and the Agency's reasons for
•	ng this strategy.
	trategies
Need:	Shortage of affordable housing for all eligible populations
Strate	egy 1. Maximize the number of affordable units available to the PHA within
	rrent resources by:
Select a	all that apply
	Employ affective maintenance and management policies to minimize the
Ш	Employ effective maintenance and management policies to minimize the number of public housing units off-line
X	Reduce turnover time for vacated public housing units
X	Reduce time to renovate public housing units
	Seek replacement of public housing units lost to the inventory through mixed
	finance development
	Seek replacement of public housing units lost to the inventory through section
	8 replacement housing resources
	Maintain or increase section 8 lease-up rates by establishing payment standards
	that will enable families to rent throughout the jurisdiction
	Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
	Maintain or increase section 8 lease-up rates by marketing the program to
Ш	owners, particularly those outside of areas of minority and poverty
	concentration
	Maintain or increase section 8 lease-up rates by effectively screening Section 8
	applicants to increase owner acceptance of program
	Participate in the Consolidated Plan development process to ensure
	coordination with broader community strategies
	Other (list below)
C44	om 2. In coord the mumb on of offendable beauty in the land
	egy 2: Increase the number of affordable housing units by:

	Apply for additional section 8 units should they become available Leverage affordable housing resources in the community through the creation of mixed - finance housing Pursue housing resources other than public housing or Section 8 tenant-based assistance. Other: (list below)	
Need:	Specific Family Types: Families at or below 30% of median	
Strategy 1: Target available assistance to families at or below 30 % of AMI Select all that apply		
	Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work Other: (list below)  Specific Family Types: Families at or below 50% of median	
Strategy 1: Target available assistance to families at or below 50% of AMI Select all that apply		
	Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work Other: (list below)	
Need:	Specific Family Types: The Elderly	
	gy 1: Target available assistance to the elderly:	
	Seek designation of public housing for the elderly Apply for special-purpose vouchers targeted to the elderly, should they become available Other: (list below)	
Need:	Specific Family Types: Families with Disabilities	
Strategy 1: Target available assistance to Families with Disabilities:		

Select all that apply		
	Seek designation of public housing for families with disabilities Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing Apply for special-purpose vouchers targeted to families with disabilities, should they become available Affirmatively market to local non-profit agencies that assist families with disabilities Other: (list below)	
Need: needs	Specific Family Types: Races or ethnicities with disproportionate housing	
	gy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:  applicable	
X	Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other: (list below)	
Strategy 2: Conduct activities to affirmatively further fair housing Select all that apply		
	Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units  Market the section 8 program to owners outside of areas of poverty /minority concentrations  Other: (list below)	
Other	Housing Needs & Strategies: (list needs and strategies below)	
(2) Reasons for Selecting Strategies Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:		
\_ \_ \_ X	Funding constraints Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other	
X	information available to the PHA Influence of the housing market on PHA programs	

X	Community priorities regarding housing assistance
	Results of consultation with local or state government
	Results of consultation with residents and the Resident Advisory Board
X	Results of consultation with advocacy groups
	Other: (list below)

### 2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources:		
Planned	l Sources and Uses	
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2006 grants)		
a) Public Housing Operating Fund	\$ 38,783.00	
b) Public Housing Capital Fund	\$ 53,604.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance		
f) Public Housing Drug Elimination		
Program (including any Technical Assistance funds)		
g) Resident Opportunity and Self-		
Sufficiency Grants		
h) Community Development Block		
Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
	\$	
3. Public Housing Dwelling Rental \$ 106,079.00 Income		

Fina	ncial Resources:	
Planne	d Sources and Uses	<u> </u>
Sources	Planned \$	Planned Uses
4. Other income (list below)	\$ 1200.00	
Vending Machine		
4. Non-federal sources (list below)		
Total resources	\$ 199,666.00	
100011000	ψ 177,000.00	
[24 CFR Part 903.7 9 (c)] <b>A. Public Housing</b> Exemptions: PHAs that do not administer publics.	olic housing are not required to	o complete subcomponent
(1) Eligibility		
a. When does the PHA verify eligibilit	y for admission to public	housing? (select all
that apply)	y for admission to passe	nousing. (sereet un
When families are within a cer	tain number of being offe	ered a unit: (state
number)  When families are within a cert	tain time of being offered	l a unit: (state time)
X Other: (describe) At time of a		i a unit. (state time)
	·FF	
b. Which non-income (screening) factor	ors does the PHA use to e	establish eligibility for
admission to public housing (select	11 0	
X Criminal or Drug-related activi	ity	
X Rental history		
X Housekeeping		
X Other (describe)		
c. X Yes No: Does the PHA requagencies for sci		n local law enforcement

<ul> <li>d. X Yes  No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?</li> <li>e. X Yes  No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)</li> </ul>
(2)Waiting List Organization
<ul> <li>a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)</li> <li>X Community-wide list</li> <li>Sub-jurisdictional lists</li> <li>Site-based waiting lists</li> <li>Other (describe)</li> </ul>
<ul> <li>b. Where may interested persons apply for admission to public housing?</li> <li>X PHA main administrative office</li> <li>DHA development site management office</li> <li>X Other (list below)</li> </ul>
c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3) <b>Assignment</b>
1. How many site-based waiting lists will the PHA operate in the coming year?
2. Yes No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?  If yes, how many lists?
3. Yes No: May families be on more than one list simultaneously If yes, how many lists?
<ul> <li>4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?</li> <li>X PHA main administrative office</li> <li>All PHA development management offices</li> <li>Management offices at developments with site-based waiting lists</li> <li>At the development to which they would like to apply</li> <li>Other (list below)</li> </ul>
(3) Assignment

<ul> <li>a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)</li> <li>X One</li> <li>Two</li> <li>Three or More</li> </ul>
b. X Yes  No: Is this policy consistent across all waiting list types?
c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:
(4) Admissions Preferences
a. Income targeting:  Yes X No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
<ul> <li>b. Transfer policies:</li> <li>In what circumstances will transfers take precedence over new admissions? (list below)</li> <li>X Emergencies</li> <li>X Overhoused</li> <li>X Underhoused</li> <li>X Medical justification</li> <li>X Administrative reasons determined by the PHA (e.g., to permit modernization work)</li> <li>Resident choice: (state circumstances below)</li> <li>Other: (list below)</li> </ul>
<ul> <li>c. Preferences</li> <li>1. Yes X No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)</li> </ul>
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
Former Federal preferences:  Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)

<ul> <li>Victims of domestic violence</li> <li>Substandard housing</li> <li>Homelessness</li> <li>High rent burden (rent is &gt; 50 percent of income)</li> </ul>		
Other preferences: (select below)  Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)		
3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.		
Date and Time		
Former Federal preferences: Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden		
Other preferences (select all that apply)  Working families and those unable to work because of age or disability  Veterans and veterans' families  Residents who live and/or work in the jurisdiction  Those enrolled currently in educational, training, or upward mobility programs  Households that contribute to meeting income goals (broad range of incomes)  Households that contribute to meeting income requirements (targeting)  Those previously enrolled in educational, training, or upward mobility programs  Victims of reprisals or hate crimes  Other preference(s) (list below)		

4. Re	lationship of preferences to income targeting requirements:  The PHA applies preferences within income tiers  Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements		
(5) O	<u>ccupancy</u>		
	at reference materials can applicants and residents use to obtain information out the rules of occupancy of public housing (select all that apply)  The PHA-resident lease The PHA's Admissions and (Continued) Occupancy policy PHA briefing seminars or written materials Other source (list)		
	w often must residents notify the PHA of changes in family composition? lect all that apply) At an annual reexamination and lease renewal Any time family composition changes At family request for revision Other (list)		
(6) De	(6) Deconcentration and Income Mixing		
a. 🗌	Yes X No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?		
b	Yes X No: Did the PHA adopt any changes to its <b>admissions policies</b> based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?		
c. If th	ne answer to b was yes, what changes were adopted? (select all that apply) Adoption of site based waiting lists If selected, list targeted developments below:		
	Employing waiting list "skipping" to achieve deconcentration of poverty or income mixing goals at targeted developments		

	If selected, list targeted developments below:
	Employing new admission preferences at targeted developments If selected, list targeted developments below:
	Other (list policies and developments targeted below)
d. 🗌	Yes X No: Did the PHA adopt any changes to <b>other</b> policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?
e. If the app	ne answer to d was yes, how would you describe these changes? (select all that ly)
	Additional affirmative marketing Actions to improve the marketability of certain developments Adoption or adjustment of ceiling rents for certain developments Adoption of rent incentives to encourage deconcentration of poverty and income-mixing Other (list below)
	ed on the results of the required analysis, in which developments will the PHA special efforts to attract or retain higher-income families? (select all that apply)  Not applicable: results of analysis did not indicate a need for such efforts  List (any applicable) developments below:
_	sed on the results of the required analysis, in which developments will the PHA special efforts to assure access for lower-income families? (select all that apply) Not applicable: results of analysis did not indicate a need for such efforts List (any applicable) developments below:
	ction 8 Not Applicable
Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).	
(1) Eligibility	
a. Wh	at is the extent of screening conducted by the PHA? (select all that apply) Criminal or drug-related activity only to the extent required by law or regulation

	Criminal and drug-related activity, more extensively than required by law or regulation
	More general screening than criminal and drug-related activity (list factors below)
	Other (list below)
b. 🗌 Y	Yes No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
c.  Y	Yes No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
d. 🗌 Y	Yes No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
that	ate what kinds of information you share with prospective landlords? (select all apply) Criminal or drug-related activity Other (describe below)
(2) Wai	ting List Organization
assis	which of the following program waiting lists is the section 8 tenant-based stance waiting list merged? (select all that apply)  None  Federal public housing
<u> </u>	Federal moderate rehabilitation Federal project-based certificate program Other federal or local program (list below)
assis	re may interested persons apply for admission to section 8 tenant-based stance? (select all that apply) PHA main administrative office Other (list below)
(3) Sear	<u>ch Time</u>
a. 🗌 Y	Yes No: Does the PHA give extensions on standard 60-day period to search for a unit?
If yes, st	tate circumstances below:

# (4) Admissions Preferences

a. Income targeting
Yes No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
b. Preferences  1. Yes No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)
2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)
Former Federal preferences  Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)  Victims of domestic violence Substandard housing Homelessness High rent burden (rent is > 50 percent of income)
Other preferences (select all that apply)  Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in your jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
3. If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the

same number next to each. That means you can use "1" more than once, "2" more than once, etc. Date and Time Former Federal preferences Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden Other preferences (select all that apply) Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in your jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below) 4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one) Date and time of application Drawing (lottery) or other random choice technique 5. If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one) This preference has previously been reviewed and approved by HUD The PHA requests approval for this preference through this PHA Plan 6. Relationship of preferences to income targeting requirements: (select one) The PHA applies preferences within income tiers Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs
<ul> <li>a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)</li> <li>The Section 8 Administrative Plan</li> <li>Briefing sessions and written materials</li> <li>Other (list below)</li> </ul>
<ul> <li>b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?</li> <li>Through published notices</li> <li>Other (list below)</li> </ul>
4. PHA Rent Determination Policies [24 CFR Part 903.7 9 (d)]  A. Public Housing
Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.
(1) Income Based Rent Policies
Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.
a. Use of discretionary policies: (select one)
X The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))
or

selected, continue to question b.)

b. Minimum Rent

The PHA employs discretionary policies for determining income based rent (If

1. What amount best reflects the PHA's minimum rent? (select one)  \$0  \$1-\$25  X \$26-\$50
2. X Yes No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?
3. If yes to question 2, list these policies below:
c. Rents set at less than 30% than adjusted income
1. Yes X No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:
<ul> <li>d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)</li> <li>For the earned income of a previously unemployed household member</li> <li>For increases in earned income</li> <li>Fixed amount (other than general rent-setting policy)</li> <li>If yes, state amount/s and circumstances below:</li> </ul>
Fixed percentage (other than general rent-setting policy)  If yes, state percentage/s and circumstances below:
For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below)
e. Ceiling rents
1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

X	Yes for all developments Yes but only for some developments No
2. Fo	r which kinds of developments are ceiling rents in place? (select all that apply)
X	For all developments For all general occupancy developments (not elderly or disabled or elderly only) For specified general occupancy developments For certain parts of developments; e.g., the high-rise portion For certain size units; e.g., larger bedroom sizes Other (list below)
	lect the space or spaces that best describe how you arrive at ceiling rents (select that apply)
x	Market comparability study Fair market rents (FMR) 95 <sup>th</sup> percentile rents 75 percent of operating costs 100 percent of operating costs for general occupancy (family) developments Operating costs plus debt service The "rental value" of the unit Other (list below)
f. Ren	nt re-determinations:
or	tween income reexaminations, how often must tenants report changes in income family composition to the PHA such that the changes result in an adjustment to nt? (select all that apply)  Never  At family option  Any time the family experiences an income increase  Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)  Other (list below)
g. 🗌	Yes X No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents
<ol> <li>In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)         <ul> <li>The section 8 rent reasonableness study of comparable housing</li> <li>Survey of rents listed in local newspaper</li> <li>Survey of similar unassisted units in the neighborhood</li> <li>Other (list/describe below)</li> <li>Rent Compatibility Study provided by Ralph Thrift Real Estate, Timpson, Texas 75975</li> <li>B. Section 8 Tenant-Based Assistance</li> </ul> </li> </ol>
Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).
(1) Payment Standards
Describe the voucher payment standards and policies.
<ul> <li>a. What is the PHA's payment standard? (select the category that best describes your standard)</li> <li>At or above 90% but below100% of FMR</li> <li>100% of FMR</li> <li>Above 100% but at or below 110% of FMR</li> <li>Above 110% of FMR (if HUD approved; describe circumstances below)</li> </ul>
<ul> <li>b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)</li> <li>FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area</li> <li>The PHA has chosen to serve additional families by lowering the payment standard</li> <li>Reflects market or submarket</li> <li>Other (list below)</li> </ul>
c. If the payment standard is higher than FMR, why has the PHA chosen this level?  (select all that apply)  FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area

Reflects market or submarket To increase housing options for families Other (list below)
<ul> <li>d. How often are payment standards reevaluated for adequacy? (select one)</li> <li>Annually</li> <li>Other (list below)</li> </ul>
<ul> <li>e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)</li> <li>Success rates of assisted families</li> <li>Rent burdens of assisted families</li> <li>Other (list below)</li> </ul>
(2) Minimum Rent
<ul> <li>a. What amount best reflects the PHA's minimum rent? (select one)</li> <li>\$0</li> <li>\$1-\$25</li> <li>\$26-\$50</li> </ul>
b. Yes X No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)
5. Operations and Management [24 CFR Part 903.7 9 (e)]
Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)
A. PHA Management Structure
Describe the PHA's management structure and organization.
(select one)
An organization chart showing the PHA's management structure and organization is attached.
A brief description of the management structure and organization of the PHA follows:

#### **B. HUD Programs Under PHA Management**

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families	Expected
	Served at Year	Turnover
	Beginning	
Public Housing	44	0
Section 8 Vouchers		
Section 8 Certificates		
Section 8 Mod Rehab		
Special Purpose Section		
8 Certificates/Vouchers		
(list individually)		
Public Housing Drug		
Elimination Program		
(PHDEP)		
Other Federal		
Programs(list		
individually)		

#### C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

#### (1) Public Housing Maintenance and Management: (list below)

Un-collected Tenant Accts. Pet Policy

Rent Collection Policy Housekeeping Policy

Petty Cash Policy Employees' Travel/Training Expense/Reimbursement

Personnel Policy Drug & Alcohol Policy Procurement Policy Disposition Policy

Capitalization Policy Standards of Conduct/Code of Ethics

Investment Policy Tenant Selection & Assignment & Compliance

Monitoring

Vehicle & Equipment Policy Eviction Policy

Security Policy Emergency & Disaster Preparedness Plan

**Extermination Policy** 

#### (2) Section 8 Management: (list below) N/A

### 6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing  1. Yes X No: Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?
If yes, list additions to federal requirements below:
<ul> <li>2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)</li> <li>X PHA main administrative office</li> <li>PHA development management offices</li> <li>Other (list below)</li> </ul>
B. Section 8 Tenant-Based Assistance  1. Yes No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?
If yes, list additions to federal requirements below:
<ul> <li>2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)</li> <li>PHA main administrative office</li> <li>Other (list below)</li> </ul>

## 7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

Α.	<b>Capital</b>	<b>Fund</b>	Activities

Program Annual Statement.

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

#### (1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select	one:
X	The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name)
-or-	
	The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)
(2) Oı	otional 5-Year Action Plan
Agencie can be c	es are encouraged to include a 5-Year Action Plan covering capital work items. This statement completed by using the 5 Year Action Plan table provided in the table library at the end of the an template <b>OR</b> by completing and attaching a properly updated HUD-52834.
a. X Y	Yes No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)
h If v	es to question a, select one:
X	The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name
-or-	
	The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)
	OPE VI and Public Housing Development and Replacement ities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund

	Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and completing as many times as necessary) Status of HOPE VI revitalization grant (complete one set of questions for each grant)
2. Deve	elopment name: elopment (project) number: as of grant: (select the statement that best describes the current as)  Revitalization Plan under development Revitalization Plan submitted, pending approval Revitalization Plan approved Activities pursuant to an approved Revitalization Plan underway
Yes X No: c) D	oes the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year?  If yes, list development name/s below:
Yes X No: d) V	Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year?  If yes, list developments or activities below:
Yes X No: e) W	Vill the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement?  If yes, list developments or activities below:
8. Demolition and Disposition [24 CFR Part 903.7 9 (h)]	
Applicability of componen	at 8: Section 8 only PHAs are not required to complete this section.
1. Yes X No:	Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", skip to component 9; if "yes", complete one activity description for each development.)
2. Activity Description	n

X Yes No:	Has the PHA provided the activities description information in the <b>optional</b> Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)
	<b>Demolition/Disposition Activity Description</b>
1a. Development nan	ne:
1b. Development (pro	oject) number:
2. Activity type: Der	
Dispo	_
3. Application status	(select one)
Approved _	J
	ending approval
Planned appli	
	pproved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units at	
6. Coverage of action	
Part of the devel	•
Total developme	
7. Timeline for activ	
-	projected start date of activity:  and date of activity:
D. I Tojecteu e	and date of activity.
or Families w. Disabilities [24 CFR Part 903.7 9 (i)]	f Public Housing for Occupancy by Elderly Families ith Disabilities or Elderly Families and Families with ment 9; Section 8 only PHAs are not required to complete this section.
1. Yes X No:	Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "No", skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description	on
X Yes No:	Has the PHA provided all required activity description
	information for this component in the <b>optional</b> Public Housing
	Asset Management Table? If "yes", skip to component 10. If
	"No", complete the Activity Description table below.
Designation of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	
Occupancy by only the elderly	
Occupancy by families with disabilities	
Occupancy by only elderly families and families with disabilities	
3. Application status (	·
Approved; included in the PHA's Designation Plan  Submitted, pending approval	
	· · · · · · · · · · · · · · · · · · ·
Planned application  4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)	
5. If approved, will this designation constitute a (select one)	
<ul><li></li></ul>	
6. Number of units affected:	
7. Coverage of action (select one)	
Part of the development	
Total development	
Total de veropinent	
10.0	
	Public Housing to Tenant-Based Assistance
[24 CFR Part 903.7 9 (j)]	ent 10; Section 8 only PHAs are not required to complete this section.
Exemptions from Compon	cit 10, Section 8 only 1 11As are not required to complete this section.
A. Assessments of R	easonable Revitalization Pursuant to section 202 of the HUD
	O Appropriations Act
1. Yes X No:	Have any of the PHA's developments or portions of
_	developments been identified by HUD or the PHA as covered
	under section 202 of the HUD FY 1996 HUD Appropriations
	Act? (If "No", skip to component 11; if "yes", complete one
	activity description for each identified development, unless
	eligible to complete a streamlined submission. PHAs
	completing streamlined submissions may skip to component
	11.)

2. Activity Description	
Yes No: Has the PHA provided all required activity description	
information for this component in the optional Public Housing	
Asset Management Table? If "yes", skip to component 11. If	
"No", complete the Activity Description table below.	
Consider CD IV III also A 42 th December 1	
Conversion of Public Housing Activity Description	
<ul><li>1a. Development name:</li><li>1b. Development (project) number:</li></ul>	
2. What is the status of the required assessment?	
Assessment underway	
Assessment results submitted to HUD	
Assessment results approved by HUD (if marked, proceed to next	
question)	
Other (explain below)	
3. Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to	
block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current	
status)	
Conversion Plan in development	
Conversion Plan submitted to HUD on: (DD/MM/YYYY)	
Conversion Plan approved by HUD on: (DD/MM/YYYY)	
Activities pursuant to HUD-approved Conversion Plan underway	
5. Description of how requirements of Section 202 are being satisfied by means other	
than conversion (select one)	
Units addressed in a pending or approved demolition application (date	
submitted or approved:  Units addressed in a pending or approved HOPE VI demolition application	
(date submitted or approved: )	
Units addressed in a pending or approved HOPE VI Revitalization Plan	
(date submitted or approved: )	
Requirements no longer applicable: vacancy rates are less than 10 percent	
Requirements no longer applicable: site now has less than 300 units	
Other: (describe below)	
B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937	

C.	<b>Reserved for</b>	Conversions pursuant to Section 33 of the U.S. Housing Act of	
193	37		

## 11. Homeownership Programs Administered by the PHA [24 CFR Part 903.7 9 (k)]

A Dublic Housing							
<b>A.</b> Public Housing Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.							
Exemptions from Compo-	Exemptions from Component 11A. Section 8 only PHAs are not required to complete 11A.						
1. Yes X No:  Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to small PHA or high performing PHA status. PHAs completing streamlined submissions may skip to component 11B.)							
2. Activity Description	on						
Yes No:	Has the PHA provided all required activity description information for this component in the <b>optional</b> Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.)						
	Public Housing Homeownership Activity Description						
(Complete one for each development affected)							
1a. Development nan							
1b. Development (pro	•						
2. Federal Program as  HOPE I  5(h)  Turnkey I  Section 3							
3. Application status: (select one)							
<u>-</u>	l; included in the PHA's Homeownership Plan/Program						
	Submitted, pending approval						
Planned application							
4. Date Homeowners	hip Plan/Program approved, submitted, or planned for submission:						
(DD/MM/YYYY)							

<ul> <li>5. Number of units affected:</li> <li>6. Coverage of action: (select one)</li> <li>Part of the development</li> </ul>						
Total developme						
-	B. Section 8 Tenant Based Assistance					
1.  Yes No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. <b>High performing PHAs</b> may skip to component 12.)					
2. Program Descript	ion:					
a. Size of Program  Yes No:	Will the PHA limit the number of families participating in the section 8 homeownership option?					
If the answer to the question above was yes, which statement best describes the number of participants? (select one)  25 or fewer participants  26 - 50 participants  51 to 100 participants  more than 100 participants						
<ul> <li>b. PHA-established eligibility criteria</li> <li>Yes No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?</li> <li>If yes, list criteria below:</li> </ul>						
12. PHA Community Service and Self-sufficiency Programs [24 CFR Part 903.7 9 (1)]						
	Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.					
A. PHA Coordination with the Welfare (TANF) Agency						
1. Cooperative agreements:						

Agenc	HA has entered into a cooperative agreement with the TANF y, to share information and/or target supportive services (as inplated by section 12(d)(7) of the Housing Act of 1937)?						
If yes,	what was the date that agreement was signed? DD/MM/YY						
apply)  Client referrals  X Information sharin otherwise)  Coordinate the proprograms to eligible Jointly administer  Partner to administer							
B. Services and program	B. Services and programs offered to residents and participants						
(1) General							
Which, if any of the enhance the econor following areas? (so Public house X Public house Section 8 and Preference Preferences	<ul> <li>a. Self-Sufficiency Policies</li> <li>Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)</li> <li>Public housing rent determination policies</li> <li>X Public housing admissions policies</li> <li>Section 8 admissions policies</li> <li>Preference in admission to section 8 for certain public housing familie</li> <li>Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the</li> </ul>						
PHA Preference/eligibility for public housing homeownership option participation Preference/eligibility for section 8 homeownership option participation Other policies (list below)							
b. Economic and	Social self-sufficiency programs						
Yes X No:	Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If "yes", complete the following table; if "no" skip to sub-component 2, Family Self						

Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs							
Program Name & Description (including location, if appropriate)	Size Method (waiting		Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)			

#### (2) Family Self Sufficiency program/s

a. Participation Description

a. Tarticipation Description							
Family Self Sufficiency (FSS) Participation							
Program	Required Number of Participants	Actual Number of Participants					
	(start of FY 2005 Estimate)	(As of: DD/MM/YY)					
Public Housing							
Section 8							
b. Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?  If no, list steps the PHA will take below:							
C. Welfare Benefit Reductions							

<ol> <li>The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)</li> <li>Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies</li> <li>Informing residents of new policy on admission and reexamination</li> <li>Actively notifying residents of new policy at times in addition to admission and reexamination.</li> <li>Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services</li> <li>Establishing a protocol for exchange of information with all appropriate TANF agencies</li> <li>Other: (list below)</li> </ol>					
D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937					
13. PHA Safety and Crime Prevention Measures  [24 CFR Part 903.7 9 (m)]  Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-					
A. Need for measures to ensure the safety of public housing residents					
<ol> <li>Describe the need for measures to ensure the safety of public housing residents (select all that apply)</li> <li>High incidence of violent and/or drug-related crime in some or all of the PHA's developments</li> <li>High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments</li> <li>Residents fearful for their safety and/or the safety of their children</li> <li>Observed lower-level crime, vandalism and/or graffiti</li> <li>People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime</li> <li>Other (describe below)</li> </ol>					
<ul><li>2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).</li><li>Safety and security survey of residents</li></ul>					

Analysis of crime statistics over time for crimes committed "in and around" public housing authority Analysis of cost trends over time for repair of vandalism and removal of graffiti Resident reports PHA employee reports Police reports Demonstrable, quantifiable success with previous or ongoing anticrime/antidrug programs Other (describe below)
ch developments are most affected? (list below)
ne and Drug Prevention activities the PHA has undertaken or plans to ake in the next PHA fiscal year
the crime prevention activities the PHA has undertaken or plans to undertake: all that apply) Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities Crime Prevention Through Environmental Design Activities targeted to at-risk youth, adults, or seniors Volunteer Resident Patrol/Block Watchers Program Other (describe below)
ch developments are most affected? (list below)
rdination between PHA and the police
ribe the coordination between the PHA and the appropriate police precincts for out crime prevention measures and activities: (select all that apply)
Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan Police provide crime data to housing authority staff for analysis and action Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence) Police regularly testify in and otherwise support eviction cases Police regularly meet with the PHA management and residents Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services Other activities (list below)

D. Additional information as required by PHDEP/PHDEP Plan PHAs eligible for FY 2005 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds. Yes No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan? No: Has the PHA included the PHDEP Plan for FY 2005 in this PHA Yes Plan? Yes No: This PHDEP Plan is an Attachment. (Attachment Filename: \_\_\_\_) 14. RESERVED FOR PET POLICY [24 CFR Part 903.7 9 (n)] 15. Civil Rights Certifications [24 CFR Part 903.7 9 (o)] Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations. 16. Fiscal Audit [24 CFR Part 903.7 9 (p)] 1. X Yes No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))? (If no, skip to component 17.) No: Was the most recent fiscal audit submitted to HUD? 2. X Yes 3. X Yes No: Were there any findings as the result of that audit? If there were any findings, do any remain unresolved? 4. | Yes | No: If yes, how many unresolved findings remain?\_ 5 X Yes No: Have responses to any unresolved findings been submitted to HUD? If not, when are they due (state below)? 17. PHA Asset Management [24 CFR Part 903.7 9 (q)] Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

2. Which developments are most affected? (list below)

1. Yes X No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including
how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have <b>not</b> been addressed elsewhere in this PHA Plan?
<ul> <li>2. What types of asset management activities will the PHA undertake? (select all that apply)</li> <li>Not applicable</li> <li>Private management</li> <li>Development-based accounting</li> <li>Comprehensive stock assessment</li> <li>Other: (list below)</li> </ul>
3. Yes X No: Has the PHA included descriptions of asset management activities in the <b>optional</b> Public Housing Asset Management Table?
18. Other Information [24 CFR Part 903.7 9 (r)]
A. Resident Advisory Board Recommendations
1. X Yes No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
<ul> <li>2. If yes, the comments are: (if comments were received, the PHA MUST select one)</li> <li>Attached at Attachment (File name)</li> <li>X Provided below:</li> </ul>
Advisory Board commented on items such as: Installing shower for bathrooms & ceiling fans
3. In what manner did the PHA address those comments? (select all that apply)  X Considered comments, but determined that no changes to the PHA Plan were necessary.
The PHA changed portions of the PHA Plan in response to comments List changes below:
Other: (list below)
B. Description of Election process for Residents on the PHA Board

1. Yes X No:	Does the PHA meet the exemption criteria provided section 2(b) (2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)					
2. Yes X No:	Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to subcomponent C.)					
3. Description of Resi	dent Election Process					
<ul> <li>a. Nomination of candidates for place on the ballot: (select all that apply)</li> <li>Candidates were nominated by resident and assisted family organizations</li> <li>Candidates could be nominated by any adult recipient of PHA assistance</li> <li>Self-nomination: Candidates registered with the PHA and requested a place on ballot</li> <li>Other: (describe)</li> </ul>						
Any recipient of Any head of ho Any adult recip	Any recipient of PHA assistance Any head of household receiving PHA assistance Any adult recipient of PHA assistance Any adult member of a resident or assisted family organization Other (list)					
<ul> <li>c. Eligible voters: (select all that apply)</li> <li>All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)</li> <li>Representatives of all PHA resident and assisted family organizations</li> <li>Other (list)</li> </ul>						
	sistency with the Consolidated Plan					
For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).						
1. Consolidated Plan jurisdiction: (provide name here)						
	the following steps to ensure consistency of this PHA Plan with an for the jurisdiction: (select all that apply)					
	based its statement of needs of families in the jurisdiction on the d in the Consolidated Plan/s.					

□ □ X	The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.  Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)					
	Other: (list below)					
3.	The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)					
	The PHA will continue to strive to meet the goal and objectives outlined in the Consolidated Plan by addressing the needs of the very low and low income Families within its jurisdiction.					
D.	Other Information Required by HUD					
Use	Use this section to provide any additional information requested by HUD.					

#### **Attachments**

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For families to be eligible for continued occupancy, each adult member must (1) contribute eight hours per month of community service (not including political activity), or (2) participate in an economic self-sufficiency program, or (3) perform eight hours per month of combined activities as previously described unless they are exempt from this requirement.

#### Notification of the Requirements

The PHA shall identify all adult family members who are apparently not exempt from the community service requirement. The PHA shall notify all such family members of the community service requirement and of the categories of individuals who are exempt from the requirement and of the categories of individuals who are exempt from the requirement. The notification will provide the opportunity for family members to claim and explain an exempt and explain an exempt status. The PHA shall verify such claims. The notification will advise families that their community service obligation will begin upon the effective date of their first annual reexamination on or after (insert) fiscal year beginning after October 1, 2000). For families paying a flat rent, the obligations begin on the date their annual reexamination would have been effective had an annual reexamination taken place. It will also advise them that failure to comply with the community service requirement will result in sequent annual reexamination.

#### **Exemptions**

The following adult family members of tenant families are exempt from this requirement:

- **A.** Family members who are 62 or older
- **B.** Family members who are blind or disabled as defined under 216(1) (1) or 1614 of the Social Security Act (42U) S.C. 416 (1) and who certifies that because of this disability she if he is unable to comply with community service requirements.
- **C.** Family members who are the primary care giver for someone who is blind or disabled as set forth in Paragraph B above.
- **D.** Family members engaged in work activity
- **E.** Family members who are exempt from work activity under part A title IV of the Social Security Act or under any other State welfare program, including the welfare-to-work.
- **F.** Family members receiving assistance, benefits or services under

a State program funded under part A title IV of the Social Security Act or under any other State welfare program, including welfare-to-work and who are in compliance.

#### **Volunteer Opportunities**

Community service includes performing work or duties in the public benefit that serve in improve the quality of life and/or enhance resident self-sufficiency, and/or increase the self-responsibility of the resident with the community. An economic self-sufficiency program is one that is designed to encourage, assist, train or facilitate the economic independence of participants and their families or to prove work for participants. These programs include programs for job training, work placement basic skills training, education, English, proficiency, work fare, financial or household management, apprenticeship, and any program necessary to ready a participant to work (such as substance abuse or mental health treatment). The PHA will coordinate with social service agencies, local schools, and the Human Resources Office in identifying a list of volunteer, community service position. Together with the resident advisory councils, the PHA may create volunteer positions such as hall monitoring, litter patrols and supervising and record keeping for volunteer.

#### The Process

At the first annual reexamination on or after (insert fiscal year beginning after October 1 200), and each annual reexamination thereafter, the PHA will do the following:

- A. Provide a list of volunteers to the family members.
- B. Provide information about obtaining suitable volunteer positions
- C. Provide a volunteer time sheet to the family member. Instruction

For the time sheet require the individual to complete the form and

- Sign for each period of work.
- D. Assign family members to a volunteer coordinator who will assist the family member in identifying appropriate volunteer positions and in meeting their responsibilities. The volunteer coordinator will track the family member's progress monthly and meet with family member as needed to best encourage compliance.
- E. Thirty (30) days before the family's next lease anniversary date, the volunteer coordinator will advise the PHA whether each applicable adult family member is in compliance with the

Community service requirement.

### Notification of non-compliance with Community Service Requirement

The PHA will notify any family found to be in noncompliance of the following:

- A. The family member(s) has been determined to be in non-compliance.
- B. That the determination is subject to the grievance procedure; and
- C. That, unless the family member(s) enter into an agreement to comply, the lease will not be renewed or will be terminated

#### **Opportunity for Cure**

The PHA will offer the family member(s) the opportunity to enter into an agreement prior to the anniversary of the lease. The agreement shall state that the family member(s) agree to enter into an economic self-sufficiency program or agrees to contribute to community service for as many hours as needed to comply with the requirement over the past 12 month period. The cure shall occur over 12 month period beginning with the date of the agreement and the resident shall at the same time stay current with that year's community service requirement. The first hours a resident earns go toward the current commitment until the current years commitment is made. The volunteer coordinator will assist the family in identifying volunteer opportunities and will track compliance on a monthly basis. If any applicable family member does not accept the terms of the agreement, does not fulfill their obligation under the agreement to perform community service, the PHA shall take action to terminate the lease.

#### Ban Against Replacement of Agency Employees

In implementing the service requirement, the PHA may not substitute community service of self-sufficiency activities performed by residents for work ordinarily performed by its employees, or replace a job at any location where residents perform activities to satisfy the service requirement

#### **Pet Policy**

#### **Exclusion**

This policy does not apply to animals that are used to assist persons with disabilities. Animals of assistance are allowed in all public housing facilities with no restrictions other than those imposed on all tenant to maintain their units and associates facilities in a decent, safe and sanitary manner and to refrain from disturbing their neighbor.

#### **Pets in Public Housing**

The PHA allows for pet ownership in its developments with written preapproval of the Housing Authority. Residents are responsibility and liability for the pet and agrees to hold the PHA harmless from any claims caused by an action or inaction of the pet.

#### **Approval**

Residents must have the prior written approval of the Housing Authority before moving a pet into their unit. Residents must request approval on the Authorization for Pet Ownership Form that must be fully completed before Housing Authority will approve the request. Residents must give the Housing Authority a picture of the pet so it can be identified if it is running loose.

#### **Types and Number of Pets**

The OHA will allow only common household pets. This means only domesticated animals such as a dog, cat, birds, rodent (including a rabbit), fish in aquariums or a turtle will be allowed in units, Common household pets do not include reptiles (except turtles). If this definition conflicts with a state or local law or regulation, the state or local law or regulation shall govern.

All dogs and cats must be spayed or neutered before they become six months old. A licensed veterinarian must verify this fact. Only (1) pet per unit will be allowed.

Any animal deemed to be potentially harmful to the health or safety of others, including attach or fight trained dogs, will not be allowed.

No animal may exceed 20 pounds in weight projected to full adult size.

#### **Inoculations**

In order to be registered, pet must be appropriately inoculated against rabies, distemper, distemper and other conditions prescribed by state and /or local ordinance. They must comply with all other state and local public health animal control, and anti-cruelty laws including any licensing requirements. A certification signed by a licensed veterinarian or state or local.

#### **Pet Deposit**

A pet deposit of \$300.00 is required at the time of registering a pet. The deposit is refundable when the pet or the family vacates the unit, less any amounts owned due to damage beyond normal wear and tear. A separate deposit is required for deposit is required for each pet.

#### Financial Obligation of Residents

Any resident who owns or keeps a pet in their dwelling unit will be required to pay for any damages caused by the pet.

Also, any pet-related insect infestation in the pet owner's unit will be the financial responsibility of the pet owner and the PHA reserves the right to exterminate and charge the resident.

#### **Nuisance or Threat To Health or Safety**

The pet and its living quarters must be maintained in a manner to prevent odors and any other unsanitary conditions in the owner's unit and surrounding areas.

Repeated substantiated complaints by neighbors or PHA personnel regarding pets disturbing the peace of neighbors through noise, odor, animal waste or other nuisance may result in the owner having to remove the pet or move him/her

Pet who make noise continuously and/or incessantly for a period of 10 minutes or intermittently for one half hour or more to the disturbance of any person at anytime of the day or night shall be considered a nuisance.

#### **Designation of Pet Areas**

Pets must be kept in the owner's apartment or on a leash at all times when outside the unit) no outdoor cages may be constructed.) Pets will

be allowed on in designated areas of the grounds of the property if the PHA designated a pet area for the particular site. Pet owners must clean up after t heir pets and are responsible for disposing of pet waste.

With the exception of animals of assistance, not pets shall allowed in community room, community room kitchen, laundry rooms, public bathrooms, lobby beauty shop, hallways or office in any of our sited. To accommodate residents who have medically certified allergic or phobic reactions to dogs, cats or other pets, those pets may be barred from certain wings (or floors) in our development(s) /building(s). This shall be implemented based on this service.

#### **Miscellaneous Rules**

Pets may not be left unattended in a dwelling unit for eight (8) hours. If pet is left unattended and no arrangements have been made for its care, the HA will have the right to enter the premises and take the uncared for pet to be boarded at a local animal care facility at the total expense of the resident. Pet bedding shall not be washed in any common lau7ndry facilities.

Residents must take appropriate actions to protect their pets from fleas and ticks. All dogs must wear a tag bearing the residents name and phone the date of the latest rabies inoculation. Pets cannot be bred or used for any commercial purpose. Resident owing cats hall maintain waterproof litter boxes for cat waste. Refuse from litter boxes shall no accumulate or become unsightly or unsanitary. Litter shall be disposed of in an appropriated manner. A pet owner shall physical control or confine his/her pet during the times when Housing Authority employees, agents of the Housing Authority or others must enter the pet owner's apartment to conduct business, provided services, enforce lease terms, etc.

If a pet cause's harm to any person, the pet's owner shall be required to permanently remove the pet from the Housing Authority. The pet owner may also be subject to termination of his/her dwelling lease. The Housing Authority's grievance procedures shall be applicable to all individual grievances or disputes arising out of violations or alleged violations of this policy.

#### **Visiting Pets**

Pets that meet the size and type criteria outlined above may visit the projects/building where pets are allowed for up to two weeks

without PHA approval. Tenant who has visiting pets must abide by the conditions of this policy regarding health, sanitation, nuisances, and peaceful enjoyment of others. If visiting pets violate this policy or cause the tenant to violate the lease, the tenant will be required to remove the visiting pet.

#### Removal of Pet

The PHA, or an appropriate community authority, shall the removal of any pet from a project if the pet's conduct or condition is determined to be a nuisance or threat to the health or safety of other occupants of the project or of other person in the community where the project is located. In the event of illness or death of pet owner, or in the case of an emergency which would prevent the pet owner from properly caring for the pet, the PHA has permission to call emergency caregiver designed by the resident or the local Pet Law Enforcement Agency to take the pet and care for it until family or friends would claim the pet and assume responsibility for it. Any expenses incurred will be the responsibility of the pet's owner.

#### Statement of progress in Meeting 5 Year Plan and Goals.

It is the statement of the Timpson Housing Authority Board of Commissioners that all goals set in the 2007-2011 plans re being net in timely manner. We are in completion phase of all work in the 5 Year Plan.

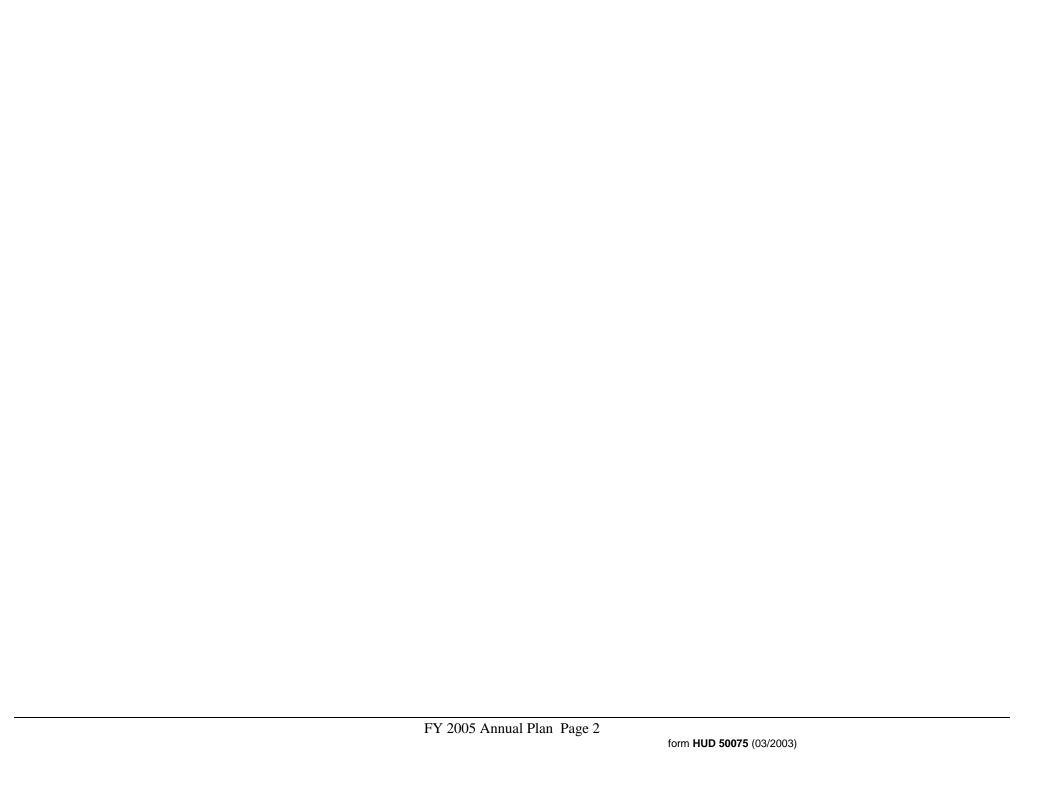
### Required Attachment: Resident Member of the PHA Governing Board

1)	Yes XX_	_/No	_does tl	ne PHA (	Governing	g Board	inclu	ıde a	t
	lease one	e member	who is	directly	assisted	by the	PHA	this y	ear.

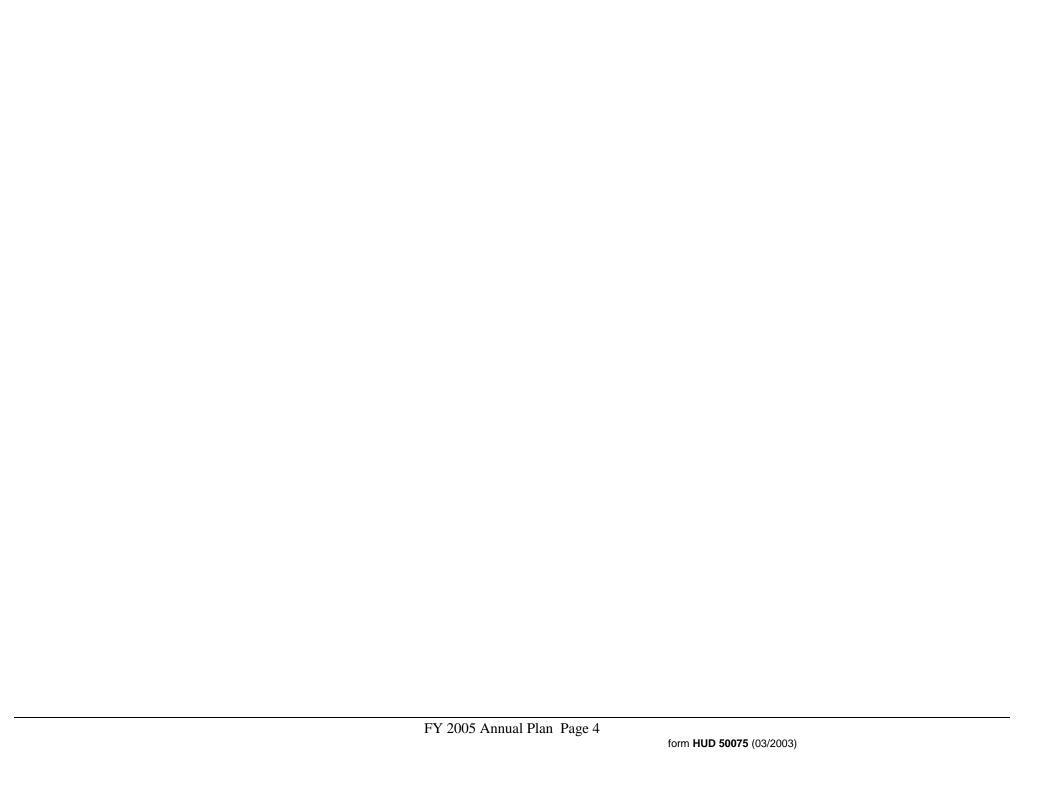
- a. Name of Resident Member of the Governing Board **Frances Hoover**
- b. How was the Board Member selected \_\_\_XX\_\_\_appointed\_\_\_\_elected
- c. The term of the appointments is April 2006 to April 2008
- 2) If the PHA Governing Board does not have at least one member who is directly assisted by the PHA, Why not.

- a. Date of next term expiration of a Governing Board MemberMay 2007
- b. Name and title of appointing official for Governing Board **Douglas McDonald, Mayor, City of Timpson**

PHA N	Name: Timpson Housing Authority	Grant Type and Number Capital Fund Program Grant Replacement Housing Fa	ant No:		Federal FY of Grant 2005
	ginal Annual Statement Reserve for Disa formance and Evaluation Report for Period Ending:	sters/ Emergencies		Statement (revision no: 1) nce and Evaluation Report	
<u> </u>	Summary by Development Account	Total 1	Estimated Cost		l Actual Cost
No.					
		Original	Revised	Obligated	Expended
	Total non-CFP Funds				
,	1406 Operations	500.00	5000.00	5000.00	5000.00
3	1408 Management Improvements	4556.00	2278.00	2278.00	2278.00
	1410 Administration	5695.00	2848.00	2848.00	2767.65
5	1411 Audit				
j	1415 Liquidated Damages				
'	1430 Fees and Costs				
}	1440 Site Acquisition				
)	1450 Site Improvement	10,000.00	3500.00	3500.00	3500.00
0	1460 Dwelling Structures	20,000.00	39,062.00	39,062.00	38,842.21
1	1465.1 Dwelling Equipment—Nonexpendable	7515.00	3757.00	3757.00	2965.68
2	1470 Nondwelling Structures	2000.00	-0-	-0-	-0-
3	1475 Nondwelling Equipment	2179.00	500.00	500.00	500.00
4	1485 Demolition				
5	1490 Replacement Reserve				
6	1492 Moving to Work Demonstration				
7	1495.1 Relocation Costs				
8	1499 Development Activities				
9	1501 Collaterization or Debt Service				
.0	1502 Contingency	56,945.00	56,945.00	56,945.00	55,853.54
1	Amount of Annual Grant: (sum of lines 2 – 20)				
2	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				



PHA N	Tame: Timpson Housing Authority	Grant Type and Number Capital Fund Program Gr Replacement Housing Fa	ant No: ctor Grant No:	Statement (revision no: 1)	Federal FY of Grant: 2005
		sters/ Emergencies			
Per Line No.	formance and Evaluation Report for Period Ending: Summary by Development Account	Total I	Estimated Cost	nce and Evaluation Report  Total	l Actual Cost
101		Original	Revised	Obligated	Expended
	Total non-CFP Funds				•
,	1406 Operations	500.00	5000.00	5000.00	5000.00
3	1408 Management Improvements	4556.00	2278.00	2278.00	2278.00
	1410 Administration	5695.00	2848.00	2848.00	2767.65
	1411 Audit				
	1415 Liquidated Damages				
	1430 Fees and Costs				
	1440 Site Acquisition				
	1450 Site Improvement	10,000.00	3500.00	3500.00	3500.00
)	1460 Dwelling Structures	20,000.00	39,062.00	39,062.00	38,842.21
1	1465.1 Dwelling Equipment—Nonexpendable	7515.00	3757.00	3757.00	2965.68
2	1470 Nondwelling Structures	2000.00	-0-	-0-	-0-
3	1475 Nondwelling Equipment	2179.00	500.00	500.00	500.00
1	1485 Demolition				
5	1490 Replacement Reserve				
5	1492 Moving to Work Demonstration				
7	1495.1 Relocation Costs				
8	1499 Development Activities				
)	1501 Collaterization or Debt Service				
)	1502 Contingency	56,945.00	56,945.00	56,945.00	55,853.54
	Amount of Annual Grant: (sum of lines 2 – 20)				
2	Amount of line 21 Related to LBP Activities				
3	Amount of line 21 Related to Section 504 compliance				
4	Amount of line 21 Related to Security – Soft Costs				
5	Amount of Line 21 Related to Security – Hard Costs				
5	Amount of line 21 Related to Energy Conservation Measures				



#### **Annual Statement/Performance and Evaluation Report** Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part I: Summary **PHA Name: Timpson Housing Authority** Grant Type and Number TX24P22650106 Federal FY of Grant Capital Fund Program Grant No: 2006 Replacement Housing Factor Grant No: X Original Annual Statement Reserve for Disasters/ Emergencies X Revised Annual Statement (revision no: 2) **Performance and Evaluation Report for Period Ending:** Final Performance and Evaluation Report Line No. **Summary by Development Account Total Estimated Cost Total Actual Cost Original** Revised Obligated Expended Total non-CFP Funds 5000.00 5000.00 5000.00 5000.00 1406 Operations 5302.00 4302.00 4302.00 1453.54 1408 Management Improvements 4 1410 Administration 6528.00 3528.00 3528.00 1254.31 1411 Audit 12300.00 12300.00 12300.00 6 1415 Liquidated Damages 1430 Fees and Costs 8 1440 Site Acquisition 5500.00 1450 Site Improvement 7500.00 5500.00 4256.80 10 1460 Dwelling Structures 22274.00 18274.00 18274.00 8074.59 1465.1 Dwelling Equipment—Nonexpendable 5000.00 3000.00 3000.00 -()-12 1470 Nondwelling Structures 10000.00 850.00 850.00 -()-13 1475 Nondwelling Equipment 1000.00 850.00 850.00 145.69 14 1485 Demolition 1490 Replacement Reserve 15 1492 Moving to Work Demonstration 16 17 1495.1 Relocation Costs 18 1499 Development Activities 1501 Collaterization or Debt Service 19 20 1502 Contingency 53,604.00 53,604.00 32,487.93 53,604.00 21 Amount of Annual Grant: (sum of lines 2-20) 22 Amount of line 21 Related to LBP Activities 23 Amount of line 21 Related to Section 504 compliance 24 Amount of line 21 Related to Security – Soft Costs 25 Amount of Line 21 Related to Security - Hard Costs Amount of line 21 Related to Energy Conservation Measures

Use this section to provide any additional attachments referenced in the Plans.

# Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Timpson Housing Authority		Capital Fund	nd Number TX Program Grant : Housing Factor	No:	Federal FY of Grant: 2006			
Developmen nber Name/HA-	General Description of Major Work Categories	Dev. Acct	Quantity				Total Actual Cost	
PH Wide				Original	Revised	Funds Obligated	Funds Expended	
	Operations	1406		5000.00	5000.00	5000.00	5000.00	Complete
	Pro-rated share to administer capital fund	1408		5302.00	4302.00	4302.00	1453.54	_
	Computer up-grade & new copier	1410		6528.00	3528.00	3528.00	1254.31	
	Audit	1411			12300.00	12300.00	12300.00	Complete
	Site improvement-tree trimming & removalimprove landscape drainage & new fence	1450		7500.00	5500.00	5500.00	4259.80	
	Total renovation of one bedroom units	1460		22274.00	18274.00	18274.00	8074.59	
	Unit appliance – stoves & units	1465		5000.00	3000.00	3000.00	-0-	
	Laundry room equipment	1470		1000.00	1000.00	850.00	-0-	
	Maintenance equipment-ext .ladders, wheelbarrow & electric hand tools	1475		1000.00	850.00	850.00	145.69	

Annual St	Annual Statement/Performance and Evaluation Report											
Capital F	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)											
Part II: S	Part II: Supporting Pages											
PHA Name:	Grant Type and Number TX22650106 Capital Fund Program Grant No: Replacement Housing Factor Grant No:				Federal FY of Grant: 2006							
Developmen nber Name/HA-	General Description of Major Work Categories	Dev. Acct	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work				
PH Wide				Original	Revised	Funds Obligated	Funds Expended					
				53,604.00	53,604.00	53,604.00	32,484.93					

nual Statement/Performance and Evaluation Report

pital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)  t III: Implementation Schedule										
Name: Timpson Housing Authority  Grant Type and Number TX226501 Capital Fund Program No: Replacement Housing Factor No:				n No:			Federal FY of Grant: 2006			
evelopment Number e/HA-Wide Activities		l Fund Obligate arter Ending Da		All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates			
	Original	Revised	Actual	Original	Revised	Actual				
PH Wide	09/09			09/10						

#### nual Statement/Performance and Evaluation Report pital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) rt III: Implementation Schedule Name: Timpson Housing Authority **Grant Type and Number TX22650106** Federal FY of Grant: 2006 Capital Fund Program No: Replacement Housing Factor No: evelopment Number All Fund Obligated All Funds Expended Reasons for Revised Target Dates ne/HA-Wide Activities (Quarter Ending Date) (Quarter Ending Date) Original Revised Revised Original Actual Actual

### PHA Plan Table Library

# Component 7 Capital Fund Program Annual Statement Parts I, II, and II

#### Annual Statement Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number FFY of Grant Approval: (4/30/2007)

#### X Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	5000.00
3	1408 Management Improvements	4200.00
4	1410 Administration	4000.00
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	5000.00
10	1460 Dwelling Structures	30,000.00
11	1465.1 Dwelling Equipment-Nonexpendable	2,000.00
12	1470 Nondwelling Structures	1000.00
13	1475 Nondwelling Equipment	2404.00
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	<b>Amount of Annual Grant (Sum of lines 2-19)</b>	53,604.00
21	Amount of line 20 Related to LBP Activities	
22	Amunt of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation	
	Measures	

#### Annual Statement Capital Fund Program (CFP) Part II: Supporting Table

Development Number/Name HA-Wide Activities	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
	Operations  Management Improvements	1406 1408	5,000.00 4,200.00
	Computer up-grades , software, tech support & travel expense	1410	4,000.00
	New sidewall& Parking lot.	1450	5,000.00
	Re-roofing (4) units & renovation of units	1460	30,000.00
	Replacement: stoves, refrigerators, etc.	1465	2,000.00
	Maintenance: Vacuum cleaner, Floor Shampooer & air compressor	1470	1,000.00
	Community Room: Kitchen Aids, Office computer desk & fire proof file cabinets	1475	2,404.00
			53,604.00

#### **Annual Statement**

**Total estimated cost over next 5 years** 

#### Capital Fund Program (CFP) Part III: Implementation Schedule

Development Number/Name HA-Wide Activities	All Funds Obligated (Quarter Ending Date)	All Funds Expended (Quarter Ending Date)
PH Wide	09/30/09	09/30/010

## Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

**Optional 5-Year Action Plan Tables** 

Development Number	Development Name (or indicate PHA wide)	Number Vacant	% Vac	ancies Flopment	
		Units			
1	PH WIDE	0	0		
TX226					
<b>Description of Need</b>	led Physical Improvements or M	<b>Ianagement</b>		Estimated	Planned Start Date
Improvements				Cost	(HA Fiscal Year)
1406 Operations 1408 Management Improvements 1410 Administration-software, tech-support & travel expense 1450 New Parking area 1460 Re-Roof 5 Units 1465 Office & laundry room h.w. heaters				5000.00 4200.00 3900.00 9219.00 28,785.00 2500.00	2008

53,604.00

# Optional Public Housing Asset Management Table Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development		
TX226	PH WIDE	0	0		
Description of Ne Improvements	eded Physical Improvements or I	Management		Estimated Cost	Planned Start Date (HA Fiscal Year)
1406 Operations				5000.00	2009
1408 Managemen 1410 Administra	nt Improvements tion- Travel expense, software up	odates, tech suppor	rt	4200.00 3900.00	
1450 Playground 1460 Renovate u	l Equipment			2500.00	
1460 Renovate u 1465 Appliances				28004.00 5000.00	
1470 Laundry Ro 1475 Maintenand				3000.00 2000.00	
1475 Wamtenand	te Equipment			2000.00	
Total estimated c	ost over next 5 years	_		53,604.00	

See Technical Guidance for instructions on the use of this table, including information to be provided.

## **Optional Table for 5-Year Action Plan for Capital Fund (Component 7)**

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Development	Development Name	Number	% Vacancies		
Number	(or indicate PHA wide)	Vacant	in Deve	lopment	
		Units			
	PH WIDE	0	0		
TX226					
<b>Description of Need</b>	ed Physical Improvements or Mana	agement		Estimated	Planned Start Date
Improvements				Cost	(HA Fiscal Year)
1406 Operations				5000.00	2010
1408 Management	Improvements			4200.00	
1410 Administration	n-Travel expense, computer upgra	de, tech –supp	ort	3900.00	
1450 Site Improver	nent – tree removal, improve drain	age @ site C		3000.00	
1460 Re-roof (5) bl	dgs & renovate units as needed			30504.00	
•	Room – Appliances & Tables & chai	irs		2000.00	
0 0	abinets & Chairs				
1475 Maintenance-	lawn mower, edger, electric hand t	ools, etc		5000.00	
Total estimated cost	t over next 5 years	53,604.00			

#### **Optional Table for 5-Year Action Plan for Capital Fund (Component 7)**

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

	7				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development		
TX226	PH WIDE				
Description of Need Improvements	ed Physical Improvements or Mar	nagement		Estimated Cost	Planned Start Date (HA Fiscal Year)
				5000.00 4200.00 3900.00 5000.00 27504.00 5000.00 3000.00	2011
Total estimated cost	t over next 5 years			53,604.00	